TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT Docket No. (Under 37 CFR 1.97(b) or 1.97(c)) 43-025 In Re Application Of: **JACOB KORF** Application No. Filing Date Examiner Customer No. Group Art Unit Confirmation No. 27106 WOUND DRAINAGE DEVICE Title: Address to: **Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450 37 CFR 1.97(b) 1. \(\bar{\sqrt{M}} \) The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114. 37 CFR 1.97(c) 2.

The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of: ☐ the statement specified in 37 CFR 1.97(e); OR the fee set forth in 37 CFR 1.17(p).

TRANSMITTA	Docket No. 43-025									
In Re Application of	JACOB KORF				.					
Application No. Filing Date		Examiner	Examiner		Group Art Unit	Confirmation No.				
				27106						
Title: WOUND DI	RAINAGE DEVICE									
	(Only cor	Paymer nplete if Applicant elects	nt of Fee to pay the f	ee set forth in 37	CFR 1.17(p))					
□ A check in the amount of is attached. □ The Director is hereby authorized to charge and credit Deposit Account No. 19-4512 as described below. □ Charge the amount of □ Credit any overpayment. □ Charge any additional fee required. □ Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Certificate of Transmission by Facsimile* Certificate of Mailing by First Class Mail □ Certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fa □ Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on										
(Date)		(Date)	÷							
	Signature	Signature of Per	rson Mailing Correspondence							
	Printed Name of Person Sig	e of Person Mailing Certificate								
Melvin/I. Stoltz Customer No. 27100 Registration No. 25, 51 Cherry Street Milford, CT 06460 (203) 874-8183 Attorney for Applic EXPRESS MAIL L	934		Dated:	March 15, 2006						
cc:										

INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

Docket Number (Optional) 43-025

JACOB KORAPO REC' DETIPTO 15 MAR 2006

Filing Date

Group Art Unit

U.S. PATENT DOCUMENTS													
*EXAMINER INITIAL	REF	DOCUMENT NUMBER		DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE					
		4,56	9,674	1986	Booth								
		4,551,141		1985	McNeil et al								
	4,681,571		1987	Nehring et al									
		4,880,411		1989	Fangrow Jr. et al								
,		5,71	,879 1998		Schneider								
. U.S. PATENT APPLICATION PUBLICATIONS													
*EXAMINER INITIAL	REF	DOCUMENT NUMBER		DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE					
				FORE	IGN PATENT DOCUMENTS								
	REF	F DOCUMENT NUMBER		DATE	COUNTRY	CLASS	SUBCLASS	Translation YES NO					
	DE 21 27 764		1972	Brown				/					
	NL1006001		1999	European Med. Contract Mfg	-			1					
·		WO 97/38732		1997	Reitsma								
		FR 2 633 825		1990	Aga Ab Oy				1				
		DE 91 01 066		1991	B. Braun Melsungen AG				1				
OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)													
									,				
EXAMINE	EXAMINER DATE CONSIDERED												
EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP Section 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.													